



APPLICATION FOR TRANSFER OF CREDIT

Date

EXECUTIVE DIRECTOR
Open University System

THRU: **DIRECTOR**
Institute of Open and Distance Education

Sir/Madam:

May I respectfully request for the transfer of credit of the courses I took from _____
as follows:

Former School:				PUP Open University System	
Term	Course Code and Title	Grade	Units	Course Code and Title	Units

Attached is my Transcript of Records from _____ together with the course description for your reference.

Thank you very much.

Very truly yours,

Signature above printed name
Program: _____
Amount Paid: _____
OR No.: _____
Date: _____

Recommending Approval:

Dean/Chairperson

College